DECLARATION ND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. P3233

In

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated be low next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Method and Apparatus for Providing an Interactive Home Agent with Access to Call Center Functionality and Resources

the specification of which (ch	eck one) is attached hereto.		
	☐ was filed on:		
		No. 08/940,712	
	and was amended of	on	
	(If applicable)		
material to the examination of the case that the present applic material information as define application and the filing date United States Code s119 of an	ewed and understood the conter- endment referred to above. I ac- this application in accordance va- ation is a continuation-in-part a d in 37 CFR s 1.56(a) which be- of the present application. I hely foreign applications for patent oplication for patent or inventor	cknowledge the duty to with Title 37, Code of Fapplication, I further ack came available between reby claim foreign prior to r inventor's certificate.	disclose information which is ederal Regulations, s 1.56 (a). Chowledge the duty to disclose the filing date of the prior rity benefits under Title 35, a listed below and have also
rifor roreign Application(s)	(Number)	(C)	(D. 0.4. 1.7.1. 7.1.
	(ivalibel)	(Country)	(Day/Month/Year Filed)
I hereby claim the benefit und and, insofar as the subject matt application in the manner prov duty to disclose material inforn between the filing date of the p	er Title 35. United States Code. er of each of the claims of this a ided by the first paragraph of T nation as defined in Title 37, Co	application is not disclo itle 35, United States Co ode of Federal Regulation	sed in the prior United States ode, \$112. I acknowledge the
(Application Serial No.): (Application Serial No.): (Application Serial No.):	340.125 (Filing Date): 04/03/9 (Filing Date): (State	tus): rus):	
POWER OF ATTORNEY: As prosecute this application and to (List name and registration nur	ansact all business in the Paten	oint the following attor t and Trademark Office	ney(s) and/or agent(s) to connected therewith.
Name: Donald R Boys	Reg. No. 35 074		

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: DAN KIKNIS	
1st inventor's signature:	Dated: 10/06/97
Residence: 20264 Ljepava Drive Saratoga, CA. 95070 Citizenship: Swiss	Dated
Post Office Address: Same	
Full name of 2nd joint inventor, if any: Oleg Bondarenko	
2nd inventor's signature: Wy ///	Dated: 10/6/97
Residence: 2707 35th Ave. San Francisco, CA. 94116 Citizenship: Russia	
Post Office Address: Same	
Full name of 3rd joint inventor, if any: Valery Issavev	•
3rd inventor's signature:	Dated: <u>10/</u> 6/97
Residence: 1245 Shelter Creek Lane San Bruno. CA. 94006 Citizenship: Ukraine	——————————————————————————————————————
Post Office Address: Same	
Full name of 4th joint inventor, if any: Yuri Shtivelman	
4th inventor's signature:	Dated:/0./0.97
Residence: 2811 Monte Cresta Drive Belmont, CA. 94102 Citizenship: Israel	Duited.i
Post Office Address: Same	;
Full name of 5th joint inventor, if any:	
5th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 6th joint inventor. if any:	
6th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 7th joint inventor. if any:	
7th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 8th joint inventor, if any:	
8th inventor's signature:	Dated:
Residence: Citizenship:	
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